Attorney's Docket No.: «Matter Matter ID» Client's Ref. No.: «Matter Client Ref»

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>PAYOUT DISTRIBUTIONS FOR GAMES OF CHANCE</u>, the specification of which:

		attached hereto.				
	[] wa [] wa	s described and claimed in PCT	No and was amended on International Application No d under PCT Article 19 on	filed on		
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.					
	I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.					
	I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:					
	Lawrence K. Kol-	David L. Feigenbaum, Reg. No. 30,378 Lawrence K. Kolodney, Reg. No. 43,807 John F. Hayden, Reg. No. 37,640 Robert E. Hillman, Reg. No. 22,837 Timothy A. French, Reg. No. 30, 175				
Address all telephone calls to DAVID L. FEIGENBAUM at telephone number (617) 542-5070. Address all correspondence to DAVID L. FEIGENBAUM at:						
						FISH & RICHARDSON P.C. 225 Franklin Street Boston, Massachusetts 02110-2804
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.					
	Full Name of Inve	entor: PETER GAIDAREV				
	Inventor's Signatu		Date:			
	Residence Address Citizenship:	s: 20 Summer Street, #603 Russian Federation	N, Malden, MA 02148			
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Attorney's Docket No.: 10530-006001 Client's Ref. No.:

Combined Declaration and Power of AttorneyPage 2 of 2 Pages

Full Name of Inventor:	JONATHAN W. WOO		
Inventor's Signature: Residence Address: Citizenship: Post Office Address:	101 Monmouth Street, #202, Brookline, MA 02446 U.S.A. 101 Monmouth Street, #202, Brookline, MA 02446	Date:	

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